

## REPRESENTATION PETITION

Is this an amended petition?   Yes  No If yes, provide the case number:								
PARTIES	Include information for a	II parties involved.	TYPE OF R	EQUEST Select ONE of the following.				
EMPLOYER	City of Cle Elum		✓ <b>NEW ORGANIZING</b> to be certified as the representative					
Contact	Jay McGowan		of employees currently unrepresented.					
Title	Mayor		ADD UNREPRESENTED EMPLOYEES to an existing bargaining unit as described in WAC 391-25-080.					
Address	301 Pennsylvania Ave	9	☐ CHANGE R	EPRESENTATIVE of existing bargaining unit.				
City, State, ZI	P Cle Elum WA 98922		☐ REMOVE REPRESENTATIVE of existing bargaining unit.					
Phone	509.674.2262	Ext.	BARGAINI	NG UNIT				
Email	jmcgowan@cleelum.	gov						
PETITIONER	Teamsters Local 760		For a new organizing petition, fill out section 2. For a petition to add unrepresented employees, fill out <b>both</b> sections 1 and 2. For a petition to change or remove the					
Contact	Kane Koerner		representative, fill out section 1.					
Title	Organizer		SECTION 1—Describe the Existing Bargaining Unit:					
Address	1211 W. Lincoln Ave							
City, State, ZI	P Yakima WA 98902							
Phone	509.452.7194	Ext	Number of Em	ployees in Existing Unit				
Email	kane@teamsters760.	org						
CURRENT BARGAINING REPRESENTATIVE (If One Exists)			SECTION 2—Describe the Proposed Bargaining Unit:  City of Cle Elum Department Heads including Chief of Police, Fire Chief, Public Works Director, and Finance Director.					
Contact			Number of Employees in Proposed Unit 4					
Title			If a CBA exists, what is the expiration date?					
Address								
City, State, Zip			SHOWING OF INTEREST					
Phone		Ext.		nterest indicating the support of at least 30				
Email				employees in the bargaining unit must be filed n. See instructions for more information.				
PETITIONE	ER REPRESENTATIV	∕E	344444					
Name	Kane Koerner		Title	Organizer				
Address	1211 W. Lincoln Ave		City, State, ZI	P Yakima WA 98902				
Phone	509.452.7194	Ext.	Email	kane@teamsters760.org				
Signature	Pou R		Date	5.18.23				

## BEFORE THE PUBLIC EMPLOYMENT RELATIONS COMMISSION STATE OF WASHINGTON

Temasters Local 760			Case Number					
Petitioner/Complainant/Filing Party v.								
City of Cle Elum			CERTIFICATE OF SERVICE					
I certify that I served a copy of this <i>(title of document)</i> Representation Petition  on all parties or their counsel of record on <i>(date)</i> 5.18.23								
To:	Name Organization	Mayor Jay McGowan City of Cle Elum		$\times$	E-mail	First Class U.S. Mail		
	Address City, State, ZIP	301Pennsylvania Ave Cle Elum WA 98922			Fax	Certified U.S. Mail		
	Email Fax	jmcgowan@cleelum.gov			Hand Delivery	Registered U.S. Mail		
To:	Name Organization	Rob Omans City of Cle Elum		X	E-mail	First Class U.S. Mail		
	Address City, State, ZIP	301 Pennsylvania Ave Cle Elum WA 98922			Fax	Certified U.S. Mail		
	Email Fax	romans@cleelum.gov			Hand Delivery	Registered U.S. Mail		
To:	Name Organization Address				E-mail	First Class U.S. Mail		
	City, State, ZIP				Fax	Certified U.S. Mail		
	Email Fax				Hand Delivery	Registered U.S. Mail		
I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.								
Date signed and submitted 5.18.23			Print Nar	me	Kane Koerner			
}			Signature	е	Rack			



From: To:

Kane Koerner
PERC, Filing (PERC)
City Of Cle Elum Dept. Heads (PERC)
Thursday, May 18, 2023 2:11:47 PM
05182023140535-0001.pdf Subject: Date:

**Attachments:** 

External Email

From: To:

Kane Koerner
PERC, Filing (PERC)
City Of Cle Elum Dept. Heads (PERC)
Thursday, May 18, 2023 2:18:25 PM
05182023140535-0001.pdf Subject: Date:

Attachments:

Importance: High

External Email

SENDING AGAIN FOR RECIEPT PURPOSES